DESI WAMIIANIÈ CAHÀ	DE91	MACHIGE	八角	UU	UY
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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Number										ber 298									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE			OR	OTHER SMALL I							
TOTAL CLAIMS			18			RATE		FEE		RATE	FEE								
FOR			NUMBER FI	NUMBER FILED NUMBER EXT		ER EXTRA		BASIC F	ĒĒ	370.00	OR	BASIC FEE	740.00						
TOTAL CHARGEABLE CLAIMS			18 minu	g minus 20= * O			X\$ 9=		OR	X\$18=									
INDEPENDENT CLAIMS			3 min	minus 3 = * Ó			X42=		OR	X84=									
MULTIPLE DEPENDENT CLAIM PRESENT							+140:			OR	+280=								
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	_	370	OR	TOTAL								
	CI	LAIMS AS A	MENDED	- PAR	TII				- 1		ı -`'	OTHER	THAN						
(Column 1) (Column 2) (Column 3)							<u>)</u>	SMAL	LE		OR	SMALL	ENTITY.						
NT A		CLAIMS REMAINING AFTER AMENDMENT		PREV	REST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
AMENDMENT	Total	· 18	Minus	**	20	= /		X\$ 9:	=	1	OR	X\$18=							
AME	Independent	. 3	Minus	***	3	7		X42=	-		OR	X84=							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM L							j	+140	_	7	OR	+280=							
. 1 ,								101		1	OR	TOTAL							
ADDIT. FEE COlumn 1) (Column 2) (Column 3)																			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
MENDMENT	Total	· 15	Minus	- 2	\mathcal{O}	=		X\$ 9	=		OR	X\$18=							
ME	Independent	· 2-	Minus	*** \	3	= \	_	X42:	-		OR	X84=							
1,	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	T CLAIM			+140	=		OR								
, ,								TO ADDIT. F			OR	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)																			
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
N N	Total	•	Minus	**		=		X\$ 9	_		OR	X\$18=							
ME	Indep nd nt	•	Minus	***		a .	_	X42:			OR	X84=							
1	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	IT CLAIM		L												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.																			
-	If the "Highest Nu "If the "Highest Nu	mber Previously P	aid For IN THIS aid For IN THIS	S SPACE S SPACE	is less that	an 20, enter "2 an 3, enter "3."	•	ADDIT. F	EE		OR	ADDIT. FEE							
1	The Highest Nun	nber Previously Pa	id For" (Total or	Indepen	dent) is the	e highest num	ber fo	und in the	""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										